ELECTRICAL LICENSE APPLICATION ST. MARY'S COUNTY BOARD OF ELECTRICAL EXAMINERS

1. Applicant's Name		
2. Company Name If Applicable		
3. Mailing Address		
City	State	Zip Code
4. Email Address		
	Cell Phone:	
APPLICANT'S SIGNATURE		DATE
Type of License you are applying f	or:	
Low Voltage License (Low Volt	age Work Only Excluding	Security Monitoring)
Restricted License (Low Voltag State Police License Number		Ionitoring) A State Police License Is Required. e is required)
	rance —Applicant's Name MUS Co. Electrical Board, PO Box (License g to reciprocate (Maryland Cou	ST be on Certificate and covered under insurance. 653, Governmental Center, Leonardtown, Md. 20650 anties only)
Must be included with Application: \$150 check made payable to: "Common Certificate of General Liability Insu	missioners of St. Mary's Countrance — Applicant's Name MU Co. Electrical Board, PO Box Co. License	ST be on Certificate and covered under insurance. 653, Governmental Center, Leonardtown, Md. 20650

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Return To:

St. Mary's County Electrical Examiners Board

P.O. Box 653

Leonardtown, MD 20650